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Bib Data Sheet

CONFIRMATION NO. 3841

SERIAL NUMBER 10/807,088	FILING DATE 03/23/2004 RULE	CLASS 701	GROUP ART UNIT 3663	ATTORNEY DOCKET NO. 10543-069
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** CONTINUING DATA ***** *<none> Rm*

** FOREIGN APPLICATIONS ***** *<none> R*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 06/03/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 2	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 2
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35 USC 119 (a-d) conditions met ☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged *Rm*
 Examiner's Signature Initials

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TITLE
 Body state estimation of a vehicle

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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